



# Fire Extinguisher Serviceman License Application



Please complete application.  
Please PRINT all information – DO NOT WRITE

Name: \_\_\_\_\_  
Last First Middle Initial

Home Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current Title/Occupation: \_\_\_\_\_  
Employer City: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_  
Zip: \_\_\_\_\_

Years of Experience servicing fire extinguishers: \_\_\_\_\_

List, in order, all of your employers for the past five (5) years beginning with your most recent employer:

Company	Location	Title	Dates
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I hereby certify that all questions on this application are answered truthfully to the best of my knowledge. I understand that the license may be suspended if discrepancies are found in the above application and that cheating on the following examination may result in my being barred from further examinations and licensing in the City of Chicago.

\_\_\_\_\_  
Signature of Applicant  
FE-Application

\_\_\_\_\_  
Date